
USING THE INFANT MORTALITY RESEARCH PARTNERSHIP (IMRP) MEDICAID PERINATAL RISK TOOL (MPRT)

Pregnancy Risk Assessment Form – Electronic Health Record (PRAF-EHR)

User Guide for Epic Hyperspace® Users

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USING THE INFANT MORTALITY RESEARCH PARTNERSHIP (IMRP) MEDICAID PERINATAL RISK TOOL (MPRT) Pregnancy Risk Assessment Form-Electronic Health Record (PRAF-EHR)

User Guide for Epic Hyperspace® Users

Welcome

This document is intended to help you get started with using the Pregnancy Risk Assessment Form-Electronic Health Record (PRAF-EHR) in Epic.

What is the Medicaid Perinatal Risk Tool?

The Infant Mortality Research Partnership (IMRP) has developed a suite of infant mortality and maternal health tools built on the Microsoft Azure cloud computing platform. The full suite of tools is called the **Medicaid Perinatal Risk Tool** (MPRT). The MPRT is designed for Epic-using health providers and intended for use in an ambulatory patient encounter. The MPRT currently consists of three tools:

- **PRAF-EHR:** Pregnancy Risk Assessment Form tool that utilizes data from patient's EHR
- **IM/PTB RC:** Infant mortality and preterm birth risk calculator
- **SMM-RC:** Severe Maternal Morbidity risk calculator (*Forthcoming*)

The Medicaid Perinatal Risk Tool **PRAF-EHR** automatically extracts PRAF data from the medical record (EHR), using the patient's MRN and the provider's Epic ID. The user can quickly review the data, then send that data to the [NurtureOhio PRAF 2.0 Ohio Department of Medicaid's Online Notification of Pregnancy System website](#) via a single click. The PRAF is then reviewed in the NurtureOhio PRAF system, edited if needed, and submitted for validation.

What do I need from Epic Hyperspace®?

Here are the prerequisites that you will need from Epic Hyperspace® before using the PRAF-EHR.

- Access to an Epic Hyperspace® account/login credentials
- Experience finding patients and navigating to encounters in Epic Hyperspace®

What do I need from NurtureOhio?

Here are the prerequisites that you will need from NurtureOhio before using the PRAF-EHR.

- Access to NurtureOhio account/login credentials
 - You must be a registered user of NurtureOhio with an OH|ID and have the prenatal visit role assigned for each OB practice that you will submit PRAFs
 - For information on how to gain access to NurtureOhio, see the: PRAF 2.0 NurtureOhio Interface: Medicaid Provider User Guide
 - If you do not currently have access or are having issues with access to NurtureOhio, please email Momsandbabies@medicaid.ohio.gov
- Access to NurtureOhio token for the practice for which the PRAF is being sent
 - Token is found in your NurtureOhio User account (See below "How do I get a NurtureOhio PRAF-EHR Token?")
 - Verify practice credentials
 - Verify users

How do I get a NurtureOhio PRAF-EHR token?

NurtureOhio website and copying the NurtureOhio PRAF token

Before launching PRAF-EHR, login to the [NurtureOhio PRAF website](https://nurtureohio.com/login) at <https://nurtureohio.com/login> so you can obtain a token and also monitor the transmission of your submitted PRAFs.

Video instructions for logging in to NurtureOhio are here:

<https://www.youtube.com/watch?v=jSjmxsoSXVI>. (Note: If you do not yet have a NurtureOhio account, instructions for setting up an account can be found in the [NurtureOhio Provider Medicaid User Guide](#).)

NurtureOhio Care • Encourage **Ohio** Department of Medicaid

PRAF 2.0 Ohio Department of Medicaid's Online Notification of Pregnancy System

Ohio Medicaid Providers/Practices: Select "OHID" from dropdown to log in with your OHID Username and Password to submit pregnancy notifications, prescriptions, and referrals for patients currently insured by Ohio Medicaid.

All Other Users, including MCPs, County and Home Health: Select "Internal" from dropdown to login with your NurtureOhio Username and Password provided to you via email.

System:

LOG IN WITH OHID

[Help](#)

- What is the PRAF 2.0?
- Who Can Use it?
- How to get access to NurtureOhio (PRAF 2.0)

Updates

Important Update:

Starting October 1, 2022, the Provider Network Management (PNM) module will be live, changing how users log in to the NurtureOhio system. NurtureOhio practice users will need to use their OHID to access the NurtureOhio system. This will require all Provider Administrators to reassign the Prenatal Visit Agent role to the Provider Agents in their systems who use the NurtureOhio system to enter Pregnancy Risk Assessment Forms (PRAFs).

Failure to reassign the Prenatal Visit Agent role can result in the inability to submit PRAFs, which may lead to the inability for patients to maintain Medicaid coverage during pregnancy and postpartum periods. Please note all users will need to have their roles assigned "In order to see multiple sites in the dropdown when submitting PRAFs, users will need their OHID to be assigned the prenatal visit role in the PNM for each Medicaid ID they wish to submit"

[I have a question about the PNM module, OHID, or portal password support](#)

After logging in, open your account by selecting your name link in the upper right corner.

NurtureOhio PRAF 2.0 Archived PRAF 2.0 Analytics Video Library Help

(your name) Logout

Patients Filter by: Please Select a Filter Option

PRAF 2.0: Patient Forms

The "Edit User Profile" page will open. Under the EHR Token(s) heading, each practice for which you have the credentials to file based on the prenatal visit role assignment in the Provider Network Management (PNM) system will be listed along with a link to the unique token for each practice (Note: the actual token code is not visible on the screen). Each practice link shows the name and location of the practice along with "Copy to Clipboard."

The screenshot shows a web interface for editing a user profile. At the top, there are two tabs: "Users" and "Edit User Profile". Below the tabs is the heading "Edit User Profile". Underneath, there is a section titled "EHR Token(s)" which lists four practices, each with a "Copy to Clipboard" link. A yellow arrow points to the first link. The practices listed are: "THE METROHEALTH SYSTEM @ 2500 METROHEALTH DR", "PARKMAN ROAD MEDICAL ASSOCIATES INC @ 2390 PARKMAN RD NW", "AHS HOSPITAL CORP OVERLOOK HOSP @ 99 BEAUVOIR AVE", and "ADVANCED EYE CARE SURGERY CNTR @ 1991 PARK AVE W". Below this section is a "USER INFORMATION" section with several input fields: "User Type" (a dropdown menu currently showing "Admin"), "First Name (name)", "Last Name (name)", and "Email / Username (email)".

About the NurtureOhio PRAF Token

A NurtureOhio token for the practice for which you want to file a PRAF will be needed when using the PRAF-EHR tool. The token is an encrypted identifier for both the user and the practice for which the user is associated. A user may have multiple tokens, one for each practice site the user is associated with.

Once a token is assigned, it does not change -- you'll use that same token every time you file a PRAF for the associated practice. The token also automatically adds the user, practice, and some provider identifiers to the PRAF form so those do not have to be manually entered. In addition, the user and practice identifiers make it possible to track the PRAF so it is retrievable after it is submitted.

To get the token, click on the practice name and "Copy to Clipboard" link. This copies the token to your clipboard so it can later be pasted into the PRAF-EHR form.

The token will look something like this: gBb6Dy:hW7tEa

Workflow Tips: Since the token needed for a PRAF submission for a practice does not change, you may want to paste your practice site token(s) into a Word doc (or .txt file) and then save that file for easy access. This allows the practice site token(s) to be available without having to open the NurtureOhio website repeatedly to copy a token.

For users with multiple practice sites, organizing work by practice site is suggested so that the copied practice site token can be repeatedly pasted into all the PRAFs for that practice site before moving onto the next practice site.

After you have copied or written down the token, you are ready to use the PRAF-EHR.

What is a summary of the workflow steps for using the PRAF-EHR?

1. From NurtureOhio website, copy the EHR token for the appropriate practice
2. Log in to Epic Hyperspace, pull up the patient and appropriate encounter
3. Launch the Medicaid Perinatal Risk Assessment tool
4. Fill out any form fields if needed (manual entry fields)
5. Paste or type in the NurtureOhio token & send the PRAF data to NurtureOhio
6. Receive confirmation that the PRAF was successfully sent to NurtureOhio
If a PRAF fails, contact support at imrp@osumc.edu
7. At the NurtureOhio website, log in to view the sent PRAF
8. Review the PRAF in NurtureOhio website and edit, make changes if needed
9. In the NurtureOhio website, finalize the form and submit to Ohio Department of Medicaid.

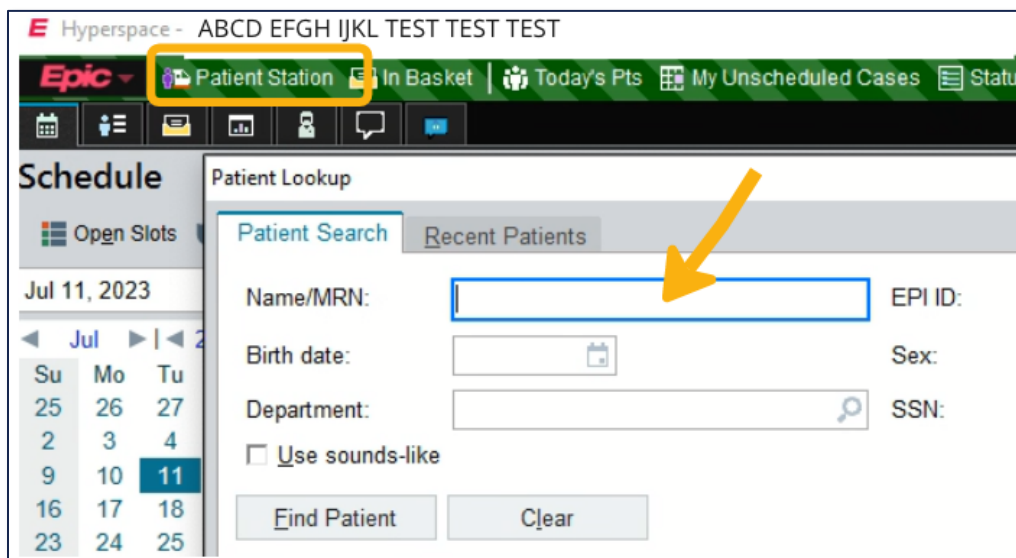
Using the PRAF-EHR tool

The Medicaid Perinatal Risk Tool with PRAF-EHR is launched from within Epic Hyperspace, so you will first need to log in to Epic Hyperspace. *Note: The specific location and name of the Medicaid Perinatal Risk Tool within Epic Hyperspace, and the encounter types for which the app will be available, will be determined by your practice/hospital group's Epic implementation team and clinical operations subject matter experts (OB, MFM, ambulatory, etc.).*

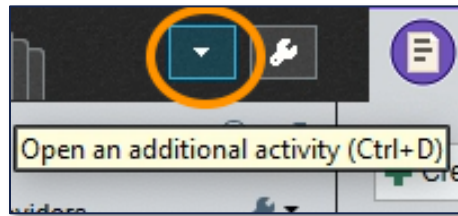
1. Log in to your organization's Epic Hyperspace, which may look similar to this:



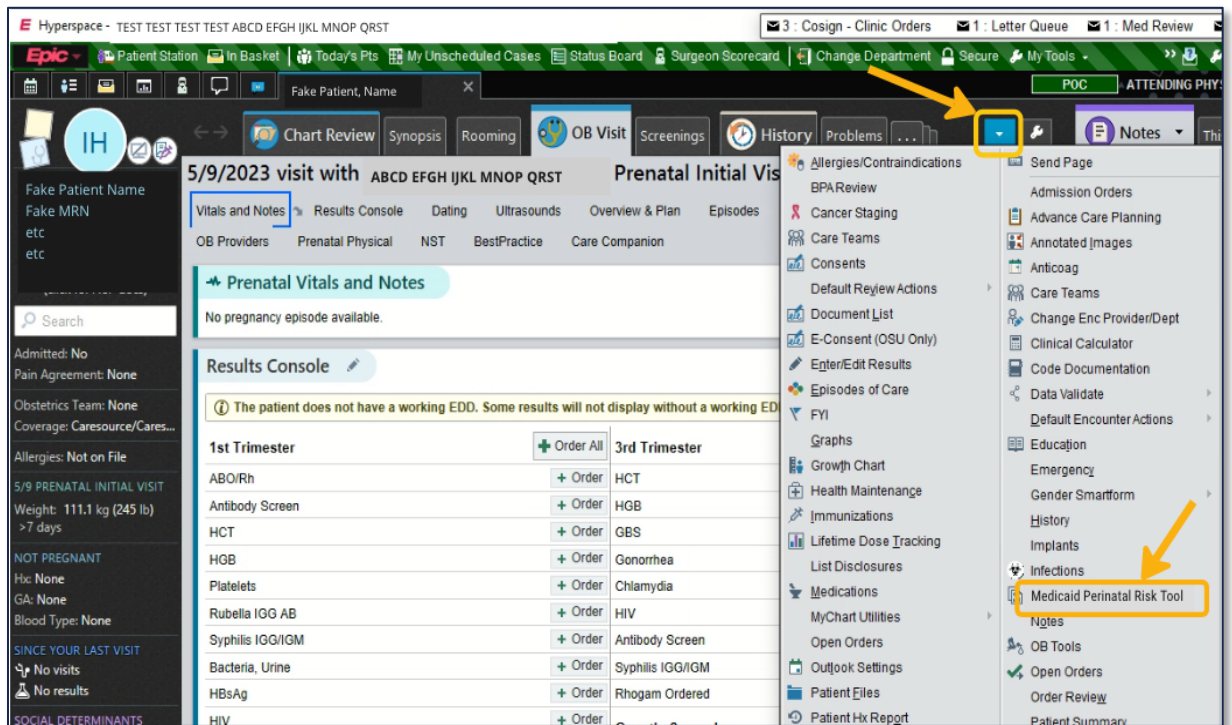
2. Locate the patient for which you will initiate a PRAF (*Note that there are many ways to pull-up a patient record via Epic Hyperspace. The example here demonstrates one common path.*)
3. Select "Patient Station" and then "Recent Patients" or select Patient Lookup and enter MRN to bring up the patient record.



4. Select the appropriate existing Encounter (*Note: your workflow may vary; check with your Epic team and clinician operations team to obtain a list of which Encounter types your practice has selected for use with the Medicaid Perinatal Risk Tool app and which Encounter type should be used to initiate a PRAF*).
 - a. When the Encounter is open, select the "More" menu arrow. This will expand to display all apps available for this Encounter type in Hyperspace:



5. Locate the Medicaid Perinatal Risk Tool. *Note that the list of available apps varies by organization. The image below is provided as an example only.*



Workflow Tip: To add the MPRT to your Hyperspace favorites, select the star icon to the right of the listing. This will make the MPRT tool appear in the main tab menu going forward.

- Click on the Medicaid Perinatal Risk Tool option from the menu or from the tab to launch the tool. The Medicaid Perinatal Risk Tool will open in a new window.
- Enter the Gestational Age (in weeks), select the PRAF-EHR radio button, and select Submit.

Patient MRN

4 88888888

Gestational Age (in weeks)

12

Tool

IM/PTB PRAF-EHR

Submit

- The PRAF-EHR form opens and is populated with mandatory PRAF data pulled from the patient's EHR. See Appendix A for a complete list of data being pulled in from the EHR.

Electronic PRAF EHR - PRAF 2.0

This page is for passing information used as part of the risk calculator to [Nurture Ohio](#) as a way to pre-populate available data in the Pregnancy Risk Assessment Form (PRAF) 2.0.

To ensure data is mapped correctly, you will need an EHR Token, provided by Nurture Ohio, before submitting. This can be found on your [user profile](#). **Paste your EHR token from Nurture Ohio below to allow data to be sent.**

Nurture Ohio Token*

ab12cd:ef34gh

Managed Care

Name of Medicaid Managed Care Plan	Traditional Medicaid
Date of Service	10/12/2023

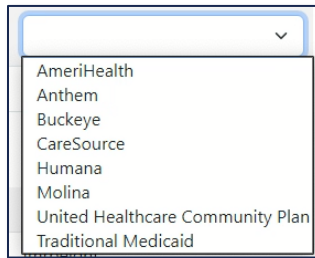
Needed by county for pregnancy notification

Patient MMIS Number	123412341234
Patient First Name	Jane
Patient Last Name	Doe

9. In addition to the PRAF data automatically pulled in from the EHR, there are manual entry fields provided to enter additional PRAF information:

a. Managed Care: "Name of Medicaid Managed Care Plan"

- If the "Name of Medicaid Managed Care Plan" does not automatically appear, select a plan from the dropdown list provided. Options include: *AmeriHealth, Anthem, Buckeye, CareSource, Humana, Molina, United Healthcare Community Plan, Traditional Medicaid*. Note: This field is mandatory. A PRAF-EHR will be rejected in the validation step of NurtureOhio if this is not completed.



b. If the Patient MMIS (Medicaid ID) Number is blank, you will need to manually enter the number (12 digits). For patients that do not have an MMIS Number, you should submit a PRAF manually using the NurtureOhio website.

c. Patient Phone and Patient Alternate Phone. If the field "Cell Phone" is checked, the following field will appear "Permission for MCO to text patient."

Patient Phone	<input type="text" value="987-345-7676"/>
	<input checked="" type="checkbox"/> Cell Phone
	<input type="checkbox"/> Permission for MCO to text patient
Patient Alternate Phone (Optional)	<input type="text"/>

d. If the County does not automatically appear, select from the dropdown.

- Select Patient County

Patient County

- Adams
- Allen
- Ashland
- Ashtabula
- Athens
- Auglaize**
- Belmont
- Brown

e. Manually select a Provider Contact: "I would like my patient's managed care plan to communicate with my office regarding an urgent need."

- Select No/Yes

Provider Contact

I would like my patient's managed care plan, home health, and/or pharmacy to communicate with my office regarding any urgent needs identified below.

--

f. Patient Risk Information: Screening info for Anxiety, Depression, Postpartum Depression, Substance Use, and Health Related Social Needs.

Manually select the screening tool used and enter referral and service dates.

Patient Risk Information

Screening tool used for Anxiety	Date of Anxiety referral	Date Anxiety service received
--	mm/dd/yyyy	mm/dd/yyyy
<input type="checkbox"/> Previously Diagnosed		
Screening tool used for Depression	Date of Depression referral	Date Depression service received
--	mm/dd/yyyy	mm/dd/yyyy
<input type="checkbox"/> Previously Diagnosed		
Screening tool used for Postpartum Depression	Date of Postpartum Depression referral	Date Postpartum Depression service received
--	mm/dd/yyyy	mm/dd/yyyy
<input type="checkbox"/> Previously Diagnosed		
Screening tool used for Substance Use	Date of Substance Use referral	Date Substance Use service received
--	mm/dd/yyyy	mm/dd/yyyy
<input type="checkbox"/> Previously Diagnosed		
Screening tool used for Health Related Social Needs	Date of Health Related Social Needs referral	Date Health Related Social Needs service received
--	mm/dd/yyyy	mm/dd/yyyy

g. Review with patient to determine need. Manually select "Patient would benefit from Managed Care and/or County Job and Family Services assistance with:"

- From the list, select any checkboxes that apply. If no checkboxes apply, leave blank.

Patient would benefit from Managed Care and/or County Job and Family Services assistance with:	<input type="checkbox"/> Transportation
For Medicaid Application Assistance call 1-844-640-OHIO.	<input type="checkbox"/> Food
For questions about Medicaid Programs, covered services or managed care call 1-800-324-8680.	<input type="checkbox"/> Housing
	<input type="checkbox"/> Utilities
	<input type="checkbox"/> Safety
	<hr/>
	<input type="checkbox"/> Anxiety
	<input type="checkbox"/> Bipolar Disorder
	<input type="checkbox"/> Depression
	<input type="checkbox"/> Postpartum Depression
	<input type="checkbox"/> Opioid Use Disorder
	<input type="checkbox"/> Substance Use
	<input type="checkbox"/> Substance Use Disorder
	<input type="checkbox"/> Health Related Social Needs
	<input type="checkbox"/> Tobacco/Nicotine Use
	<input type="checkbox"/> Tobacco Counseling / Treatment
	<input type="checkbox"/> Alcohol Use
	<input type="checkbox"/> Alcohol Counseling / Treatment
	<hr/>
	<input type="checkbox"/> Late To Prenatal Care
	<input type="checkbox"/> Gestational Hypertension
	<input type="checkbox"/> Gestational Diabetes
	<input type="checkbox"/> Preeclampsia
	<input type="checkbox"/> Low Birth Weight
	<input type="checkbox"/> Preterm Birth
	<input type="checkbox"/> Connection to Tobacco Cessation Services
	<input type="checkbox"/> Assistance with finding a BH provider
	<input type="checkbox"/> Assistance with finding a primary care provider
	<input type="checkbox"/> Connection to SUD Services
	<hr/>
	<input type="checkbox"/> Other Needs
	<input type="checkbox"/> No Needs Identified

h. Manually provide answers to the risk questions below. Note that for some questions, such as “Is patient currently smoking or using tobacco products?” a “Yes” answer will display additional smoking related questions.

Current Gestational Diabetes Mellitus (GDM) diagnosis?	No	▼
Previous diagnosis of GDM during pregnancy?	No	▼
Is patient currently smoking or using tobacco products?	Yes	▼
Is patient willing to quit smoking or using tobacco products during pregnancy?	--	▼
Referral to smoking / tobacco cessation resource? Check all that apply.	<input type="checkbox"/> Yes - request Managed Care Plan connect patient to resources <input type="checkbox"/> Yes - we will connect patient to additional resource(s) <input type="checkbox"/> No referral request at this time	
Prior Pregnancy Risks. Check all that apply.	<input type="checkbox"/> Tobacco/Nicotine Use <input type="checkbox"/> Substance Use Disorder <input type="checkbox"/> Alcohol Use <input type="checkbox"/> Opioid Use Disorder <input type="checkbox"/> Postpartum Depression <input type="checkbox"/> Gestational Hypertension <input type="checkbox"/> Preeclampsia <input type="checkbox"/> Gestational Diabetes <input type="checkbox"/> Low Birth Weight <input type="checkbox"/> Preterm Birth	
My office would like my patient's Medicaid MCO to communicate with my office about their assistance.	<input type="checkbox"/>	
My patient would benefit from a referral to WIC.	<input type="checkbox"/>	
My patient would benefit from a referral for Home Visiting.	<input type="checkbox"/>	

- i. When the "Other Needs" checkbox is checked above, PRAF-EHR automatically loads pregnancy-related risk factors from the patient's chart in Epic and displays them in PRAF-EHR's "Other Needs" section (see Appendix A "Other Needs" for the complete risk factor list). If any other risk factors need to be indicated, please specify them in the *Additional needs not listed above* box in addition to specifying any additional medical or nonmedical needs the patient has.

Other Needs	Prenatal Anemia	BMI: Obese
	Cervical Shortening	Pregnancy with Multiples
	Prepregnancy Diabetes	Prepregnancy Hypertension

- To send the PRAF-EHR data to NurtureOhio, enter the user token and select the "Send data to NurtureOhio" button which is at the bottom of the PRAF page.

My office would like my patient's Medicaid MCO to communicate with my office about their assistance.

My patient would benefit from a referral to WIC.

My patient would benefit from a referral for Home Visiting.

Upon selecting the Send data to NurtureOhio button, the PRAF-EHR data is immediately transmitted to NurtureOhio and a confirmation appears. If a PRAF fails to send due to an error, the end user will see the following message: "There was a problem submitting the PRAF. "

Any of the following error messages may occur:

- "Invalid/Missing Date(s) of Service."
- "Patient Date of Birth Does Not Match the Patient on File."
- "Invalid/Missing Patient Medicaid ID.**"
- "Invalid/Missing Patient Name."
- "Patient Not Found."
- "Duplicate Patient ID Number."

If you see any of the above messages, attempt to correct them in the PRAF-EHR and re-send the form using the "Resubmit data to NurtureOhio" option. If you do not resolve the above

errors, the PRAF-EHR will not be transmitted to NurtureOhio. If after attempting to resolve, you still have issues, please contact MomsandBabies@medicaid.ohio.gov and/or click the help button in NurtureOhio.

**If the error is "Invalid/Missing Patient Medicaid ID" you can try adding the social security number manually in NurtureOhio as an alternative to the Medicaid Patient ID (MMIS Number).

Note that at this point the PRAF-EHR has not yet been submitted to Ohio Department of Medicaid. It has only been transferred to NurtureOhio where the form's status will be an "In Process-EHR."

The transmitted PRAF data can then be viewed immediately by logging in to the [NurtureOhio website](#).

To view, select the NurtureOhio PRAF 2.0 Patient Forms tab. All of the PRAF-EHR forms that were transmitted will appear in the list. Because the EHR token was used, the Practice, Provider and User information recorded in the PNM will be automatically added to each PRAF-EHR record. The PRAF will display in blue within NurtureOhio to indicate it was submitted through the PRAF-EHR.

From within the NurtureOhio website, the PRAF-EHR transmitted forms can be edited and submitted for validation just like a manually entered form. If a mistake was made in data entry in the PRAF-EHR, the mistake can be corrected; if a form is submitted for validation and rejected, the form can be edited and resubmitted.

When the PRAF-EHR's validation fails for the MMIS/Patient Medicaid ID, the MMIS/Patient Medicaid ID is removed and the user can enter the correct MMIS/Patient Medicaid ID manually within NurtureOhio. If the MMIS/Patient Medicaid ID is not known, the user can check "Patient Medicaid ID Not Known" and enter the patient's SSN in the appropriate box.

If you unintentionally hit submit more than once, it will send a duplicate record. Please email Momsandbabies@medicaid.ohio.gov to have duplicates removed.

Appendix A - list of PRAF data values that may be pulled from EHR

Date of Service	Other Needs
Patient MMIS Number	Pre-pregnancy hypertension
Patient First Name	Pre-pregnancy diabetes
Patient Last Name	BMI (obesity; underweight)
Estimated date of confinement	Severe mental illness
Gestational Weeks	Previous preterm birth
Name of Medicaid Managed Care Plan	Poor pregnancy outcome
Number of Fetuses	Prenatal anemia
Patient Date of Birth	High risk pregnancy
Patient Street	Cervical shortening
Patient City	Congenital anomaly
Patient State	Pregnancy with multiples
Patient Zip Code	Preeclampsia
Patient Phone	Gestational hypertension
Primary Language is English	Poor fetal growth
Primary Language (if not English)	
How does the patient describe their ethnicity?	
How does the patient describe their race?	
Current Gestational Diabetes Mellitus (GDM) diagnosis?	
Previous diagnosis of GDM during pregnancy?	
Is patient currently smoking or using tobacco products?	
ICD-10 - Select all that apply	

Appendix B - List of PRAF manual entry fields:

If any of the fields in Appendix A cannot be pulled in from the Patient's Epic Electronic Health Record (EHR), those values can typed in or selected manually.

- Gestational Days
- Patient Alternate Phone (Optional)
- Provider Contact: I would like my patient's managed care plan, home health, and/or pharmacy to communicate with my office regarding any urgent needs identified below.
- Patient Risk Information Screening tool related questions.

- Screening tools used for Anxiety, Depression, Postpartum Depression, Substance Use, and Health Related Social Needs. Each of these five conditions has 4 manual entry fields:
 - Select screening tool from dropdown
 - Enter date of referral
 - Enter date of service
 - Previously Diagnosed checkbox
- Patient would benefit from Managed Care and/or County Job and Family Services assistance with: For Medicaid Application Assistance call 1-844-640-OHIO. For questions about Medicaid Programs, covered services or managed care call 1-800-324-8680. Some checkboxes may appear pre-checked based on Patient's EHR. All checkboxes can be manually checked and unchecked.
 - List of checkboxes can be manually selected
- Additional needs not listed above:
 - Any needs not listed in the "Patient would benefit..." checkboxes can be manually entered in this field
- Referral to smoking / tobacco cessation resource? Check all that apply.
 - If yes, Please select the additional resource(s) you plan to connect the patient to.
- Alcohol Counseling/Treatment (if "Patient would benefit..." Alcohol Use box is checked, this field appears)
- Opioid Use Follow-Up (if "Patient would benefit..." Opioid User Disorder box is checked, this field appears)
- Other Substance Use Counseling/Treating (if "Patient would benefit..." Substance Use Disorder box is checked, this field appears)
- Tobacco/Nicotine Counseling/Treatment (if "Patient would benefit..." Tobacco/Nicotine Use box is checked, this field appears)
- My office would like my patient's Medicaid MCO to communicate with my office about their assistance.
- My patient would benefit from a referral to WIC.
- My patient would benefit from a referral for Home Visiting.